

PERFORMANCE EVALUATION (CONSTRUCTION)				1. CONTRACT NUMBER 2. CEC NUMBER	
IMPORTANT: Be sure to complete Part III - Evaluation of Performance Elements on reverse					
PART I - GENERAL CONTRACT DATA					
3. TYPE OF EVALUATION (<i>X one</i>) <input type="checkbox"/> INTERIM (<i>List percentage _____%</i>) <input type="checkbox"/> FINAL <input type="checkbox"/> AMENDED				4. TERMINATED FOR DEFAULT <input type="checkbox"/>	
5. CONTRACTOR (<i>Name, Address, and ZIP Code</i>)				6.a. PROCUREMENT METHOD (<i>X one</i>) <input type="checkbox"/> SEALED BID <input type="checkbox"/> NEGOTIATED	
				b. TYPE OF CONTRACT (<i>X one</i>) <input type="checkbox"/> FIRM FIXED PRICE <input type="checkbox"/> COST REIMBURSEMENT	
				<input type="checkbox"/> OTHER (<i>Specify</i>)	
7. DESCRIPTION AND LOCATION OF WORK					
8. TYPE AND PERCENT OF SUBCONTRACTING					
9. FISCAL DATA ➤		a. AMOUNT OF BASIC CONTRACT \$	b. TOTAL AMOUNT OF MODIFICATIONS \$	c. LIQUIDATED DAMAGES ASSESSED \$	d. NET AMOUNT PAID CONTRACTOR \$
10. SIGNIFICANT DATES ➤		a. DATE OF AWARD	b. ORIGINAL CONTRACT COMPLETION DATE	c. REVISED CONTRACT COMPLETION DATE	d. DATE WORK ACCEPTED
PART II - PERFORMANCE EVALUATION OF CONTRACTOR					
11. OVERALL RATING (<i>X appropriate block</i>) <input type="checkbox"/> OUTSTANDING <input type="checkbox"/> ABOVE AVERAGE <input type="checkbox"/> SATISFACTORY <input type="checkbox"/> MARGINAL <input type="checkbox"/> UNSATISFACTORY (<i>Explain in Item 20 on reverse</i>)					
12. EVALUATED BY					
a. ORGANIZATION (<i>Name and Address (Include ZIP Code)</i>)				b. TELEPHONE NUMBER (<i>Include Area Code</i>)	
c. NAME AND TITLE			d. SIGNATURE		e. DATE
13. EVALUATION REVIEWED BY					
a. ORGANIZATION (<i>Name and Address (Include ZIP Code)</i>)				b. TELEPHONE NUMBER (<i>Include Area Code</i>)	
c. NAME AND TITLE			d. SIGNATURE		e. DATE
14. AGENCY USE (<i>Distribution, etc.</i>)					

FOR OFFICIAL USE ONLY (WHEN COMPLETED)

PART III - EVALUATION OF PERFORMANCE ELEMENTS

N/A = NOT APPLICABLE O = OUTSTANDING A = ABOVE AVERAGE S = SATISFACTORY M = MARGINAL U = UNSATISFACTORY

15. QUALITY CONTROL							16. EFFECTIVENESS OF MANAGEMENT						
	N/A	O	A	S	M	U		N/A	O	A	S	M	U
a. QUALITY OF WORKMANSHIP							a. COOPERATION AND RESPONSIVENESS						
b. ADEQUACY OF THE CQC PLAN							b. MANAGEMENT OF RESOURCES/ PERSONNEL						
c. IMPLEMENTATION OF THE CQC PLAN							c. COORDINATION AND CONTROL OF SUBCONTRACTOR(S)						
d. QUALITY OF QC DOCUMENTATION							d. ADEQUACY OF SITE CLEAN-UP						
e. STORAGE OF MATERIALS							e. EFFECTIVENESS OF JOB-SITE SUPERVISION						
f. ADEQUACY OF MATERIALS							f. COMPLIANCE WITH LAWS AND REGULATIONS						
g. ADEQUACY OF SUBMITTALS							g. PROFESSIONAL CONDUCT						
h. ADEQUACY OF QC TESTING							h. REVIEW/RESOLUTION OF SUBCONTRACTOR'S ISSUES						
i. ADEQUACY OF AS-BUILTS							i. IMPLEMENTATION OF SUBCONTRACTING PLAN						
j. USE OF SPECIFIED MATERIALS													
k. IDENTIFICATION/CORRECTION OF DEFICIENT WORK IN A TIMELY MANNER													
17. TIMELY PERFORMANCE							18. COMPLIANCE WITH LABOR STANDARDS						
a. ADEQUACY OF INITIAL PROGRESS SCHEDULE							a. CORRECTION OF NOTED DEFICIENCIES						
b. ADHERENCE TO APPROVED SCHEDULE							b. PAYROLLS PROPERLY COMPLETED AND SUBMITTED						
c. RESOLUTION OF DELAYS							c. COMPLIANCE WITH LABOR LAWS AND REGULATIONS WITH SPECIFIC ATTENTION TO THE DAVIS-BACON ACT AND EEO REQUIREMENTS						
d. SUBMISSION OF REQUIRED DOCUMENTATION													
e. COMPLETION OF PUNCHLIST ITEMS							19. COMPLIANCE WITH SAFETY STANDARDS						
f. SUBMISSION OF UPDATED AND REVISED PROGRESS SCHEDULES							a. ADEQUACY OF SAFETY PLAN						
g. WARRANTY RESPONSE							b. IMPLEMENTATION OF SAFETY PLAN						
							c. CORRECTION OF NOTED DEFICIENCIES						

20. REMARKS (Explanation of unsatisfactory evaluation is required. Other comments are optional. Provide facts concerning specific events or actions to justify the evaluation. These data must be in sufficient detail to assist contracting officers in determining the contractor's responsibility. Continue on separate sheet(s), if needed.)